

**DEPARTMENT OF VETERANS AFFAIRS'**  
**COMPENSATED WORK THERAPY / TRANSITIONAL RESIDENCE**  
**PROGRAM**

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**Prompt Book**

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**Revised October 2001**

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## **Living Arrangements List**

### **Admission Assessment**

- a. Own apt, room or house
- b. Someone else's apt, room or house
- c. VA hospital substance abuse unit
- d. VA hospital psychiatric unit
- e. VA hospital – all other units
- f. VA domiciliary
- g. Non-VA hospital substance abuse unit
- h. Non-VA psychiatric unit
- i. Non-VA hospital – all other units
- j. VA sponsored residential treatment program (HCMI)
- k. Non-VA sponsored residential treatment program (halfway house)
- l. Hotel, Single Room Occupancy (SRO), boarding house
- m. Shelter for the homeless
- n. Outdoors, automobile, truck, boat
- o. Prison, jail
- p. Other

### **Follow-Up**

- a. Own apt, room or house
- b. Someone else's apt, room or house
- c. VA hospital substance abuse unit
- d. VA hospital psychiatric unit
- e. VA hospital – all other units
- f. VA domiciliary
- g. Non-VA hospital substance abuse unit
- h. Non-VA psychiatric unit
- i. Non-VA hospital – all other units
- j. VA sponsored residential treatment program (HCMI)
- k. Non-VA sponsored residential treatment program (halfway house)
- l. Hotel, Single Room Occupancy (SRO), boarding house
- m. Shelter for the homeless
- n. Outdoors, automobile, truck, boat
- o. Prison, jail
- p. CWT/TR residence
- q. Other

## **ASI Rating Scale**

0 = Not at all

1 = Slightly

2 = Moderately

3 = Considerably

4 = Extremely

## **Drugs**

- a. Heroin, methadone, opiates or pain killers (morphine, darvon, codeine)
- b. Barbiturates or tranquilizers (valium)
- c. Crack
- d. Cocaine (not crack)
- e. Amphetamines (speed, benzedrine, dexedrine)
- f. Cannabis (marijuana, hashish)
- g. Hallucinogens (LSD) and inhalants (glue)

**Rating Scale for Craving and/or  
Using Alcohol and Drugs**

0 = Never

1 = Almost never

2 = Sometimes

3 = Fairly often

4 = Very often

### **Situations in Which You Craved or Used Alcohol or Drugs the Most**

1. To calm my nerves.
2. To get to sleep.
3. When I'm angry.
4. When I'm down or depressed.
5. When I can't stop thinking about personal war experiences.
6. After doing something I feel guilty or ashamed about.
7. When I want to celebrate with a friend.
8. When I'm bored or have nothing else to do.
9. When I'm having problems with people at work.

**How Often Do You See the People You Feel Close to  
Face-to-Face?**

0 = Never

1 = Hardly ever

2 = Several times a year

3 = Once or more per month

4 = Once or more per week

5 = Daily

6 = Lives with me